

FORM C/OH
COVER SHEET PG 1

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

ELENA K GUAJARDO

16 ACCOUNT # (Ethics Commission files)

17 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages18 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$880.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$20649.96

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$0

4. TOTAL POLITICAL EXPENDITURES

\$15448.67

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$6081.29

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$0

19 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ELENA K GUAJARDO, this the 7th day
of April, 20 05, to certify which, witness my hand and seal of office.

Signature of officer administering oath_____
Printed name of officer administering oath_____
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

1 of 51

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/31/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERT A BIASOLLI

6 Contributor address; City; State; Zip Code

126 LAUREL HEIGHTS PL
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)

50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/31/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHARLES TUCKER

Contributor address; City; State; Zip Code

530 FENWICK
SAN ANTONIO, TX 78239

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHERYLON ROBINSON

Contributor address; City; State; Zip Code

13010 TRENT
SAN ANTONIO, TX 78232

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/31/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

EMILY THUSS

Contributor address; City; State; Zip Code

215 E. HUISACHE
SAN ANTONIO, TX 78212

Amount of
contribution (\$)

130.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/5/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

IRENE RAMIREZ

Contributor address; City; State; Zip Code

926 WEST WOODLAWN
SAN ANTONIO, TX 78201

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

2 of 51

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/2/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

BRUCE JARSTFER

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3204 TOPANGA CANYON
SAN ANTONIO, TX 78210

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

VIRGINIA STOWITTS

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

15723 KNOLL STONE
SAN ANTONIO, TX 78247

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/4/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JANICE PICHLER

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

511 BLAKELY
SAN ANTONIO, TX 78209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ARLIS SCHMIDT

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2022 BROKEN OAK
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

NASW/TEXAS-TPACE

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

810 W 11TH STREET
AUSTIN, TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/6/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

BEATRI GOMEZ

6 Contributor address; City; State; Zip Code

11311 LIMA DRIVE
SAN ANTONIO, TX 78213

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PAUL BOSKIND

Contributor address; City; State; Zip Code

422 KING WILLIAM
SAN ANTONIO, TX 78204

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JEFFREY HONS

Contributor address; City; State; Zip Code

100 MARY D, Apt/Suite: 11
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

G. PETER IRWIN

Contributor address; City; State; Zip Code

700 SOUTH ZARZAMORA
SAN ANTONIO, TX 78207

Amount of
contribution (\$)
20.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MIRYAM BUJANDA

Contributor address; City; State; Zip Code

414 LARAMIE DRIVE
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/10/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

EDWARD COURTNEY

7 Amount of
contribution (\$)
500.00

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

6007 CROWN WAY
SAN ANTONIO, TX 78239

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

KATHERINE A COURTNEY

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

6007 CROWN WAY
SAN ANTONIO, TX 78239

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/5/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ARLIS OLSON

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

3709 CANDLECREEK
SAN ANTONIO, TX 78244

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/5/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARIA-ISABEL RODRIGUEZ

Amount of
contribution (\$)
75.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

1950 TEXAS AVE
SAN ANTONIO, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MONA MCDONALD

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

243 EAST SKYVIEW DR
SAN ANTONIO, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/6/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

KATHLEEN FURUKAWA

6 Contributor address; City; State; Zip Code

2547 ASHTON VILLAGE DR
SAN ANTONIO, TX 78248

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOHN HOLCOMB

Contributor address; City; State; Zip Code

11901 TOEPPERWEIN, Apt/Suite: 1101
SAN ANTONIO, TX 78233

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DEBORAH CANJAR

Contributor address; City; State; Zip Code

364 E. CATCLAW CT
GILBERT, AZ 85296

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SHARON CLEMONS

Contributor address; City; State; Zip Code

946 AMBERSTONE DRIVE
SAN ANTONIO, TX 78258

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/5/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BETTY NAYLOR

Contributor address; City; State; Zip Code

1122 COLORADO, Apt/Suite: 307
AUSTIN, TX 78701

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/13/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

OLGA HERNANDEZ

6 Contributor address; City; State; Zip Code

8206 BRIXTON
SAN ANTONIO, TX 78250

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DEBORAH MYERS

Contributor address; City; State; Zip Code

203 GREENLAWN
SAN ANTONIO, TX 78201

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROXANNE HENKIN

Contributor address; City; State; Zip Code

207 NORTHCREST
SAN ANTONIO, TX 78213

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CRISTINA M RAMIREZ

Contributor address; City; State; Zip Code

146 TEAKWOOD LANE
SAN ANTONIO, TX 78216

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DANIEL GRANEY

Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232-7442

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

2/13/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

WANDA LYMAN

6 Contributor address; City; State; Zip Code

3222 HOWARD, Apt/Suite: 803W
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)
25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERTO FLORES

Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CLARICE SATEL

Contributor address; City; State; Zip Code

PO Box 896
LEAKEY, TX 78873

Amount of
contribution (\$)
20.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

WILLIAM MCBROOM

Contributor address; City; State; Zip Code

712 SOUTH MAIN AVE
SAN ANTONIO, TX 78204

Amount of
contribution (\$)
10.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CYNTHIA HINOJOSA

Contributor address; City; State; Zip Code

9134 BRAE GLEN
SAN ANTONIO, TX 78249

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/13/2005

5 Full name of contributor

PAULA BEAVERS

☐ out-of-state PAC (ID# _____)

7 Amount of
contribution (\$)
500.00

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

337 SEELING BLVD
SAN ANTONIO, TX 78228

9 Principal occupation / Job title (See Instructions)
RETIRED

10 Employer (See Instructions)

Date

2/13/2005

Full name of contributor

B VELOZ

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
125.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

230 W CRAIG PLACE
SAN ANTONIO, TX 78212

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

MARY N ABBOTT

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

337 SEELING BLVD
SAN ANTONIO, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

ROSE DELGADO

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

2626 MONTEBELLO
SAN ANTONIO, TX 78259

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

MARGARET A JOSEPH

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)
40.00

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

104 SUNNYLAND DR
SAN ANTONIO, TX 78228

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/19/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JAY VELA

6 Contributor address; City; State; Zip Code

1610 BANDERA RD
SAN ANTONIO, TX 78228

7 Amount of
contribution (\$)
250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)
INSURANCE AGENT

10 Employer (See Instructions)

Date

2/19/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

IRENE RAMIREZ

Contributor address; City; State; Zip Code

926 WEST WOODLAWN
SAN ANTONIO, TX 78201

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JEANETTE CAFFERTY

Contributor address; City; State; Zip Code

638 OAK HOLLOW RD
KERRVILLE, TX 78028

Amount of
contribution (\$)
150.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

RETIRED

Date

2/19/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARTIN SABLLIK

Contributor address; City; State; Zip Code

5620 CHARLIE CHAN
SAN ANTONIO, TX 78240

Amount of
contribution (\$)
40.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

RESEARCH SCIENTIST

Date

2/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BETH JOHNSON

Contributor address; City; State; Zip Code

526 N MEADOW LANE
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/20/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

KD CAMPBELL

6 Contributor address; City; State; Zip Code

2014 WHISPERING WATER
SPRING BRANCH, TX 78070

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)
SELF EMPLOYED

Date

2/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ANDREA MAIDA

Contributor address; City; State; Zip Code

9431 TREE HAVEN
SAN ANTONIO, TX 78245

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

AURORA C HERNANDEZ

Contributor address; City; State; Zip Code

523 CARROLL AVE
SAN ANTONIO, TX 78225

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

KIM LANING

Contributor address; City; State; Zip Code

724 SKYLANE DR
UVALDE, TX 78801

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JILL MORLOCK

Contributor address; City; State; Zip Code

5918 WEXFORD BRK
SAN ANTONIO, TX 78240

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

2/21/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

ALBERT EISCH

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

2546 W. WOODLAWN AVE
SAN ANTONIO, TX 78228

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHRISTOPHER KOHN

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1700 JACKSON-KELLER RD, Apt/Suite: 2508
SAN ANTONIO, TX 78213

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LESLIE A SAENZ

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

8302 WATCHTOWER
SAN ANTONIO, TX 78254

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JANE HOOD

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7744 WETHERSFIELD DR
WEST CHESTER, OH 45069

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

VIBEKE MENDONCA

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5767 SPRING SUNSHINE
SAN ANTONIO, TX 78247

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

SOCIAL WORKER

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

2/22/2005

5 Full name of contributor

ROBERT SAUCEDO

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

1902 WEST SUMMIT AVE
SAN ANTONIO, TX 78201

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/28/2005

Full name of contributor

JORGE HERRERA

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2600 LAKE AUSTIN BLVD, Apt/Suite: 19105
AUSTIN, TX 78703

Principal occupation / Job title (See Instructions)

LAW STUDENT

Employer (See Instructions)

Date

2/16/2005

Full name of contributor

JORGE HERRERA

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

105 BLACKHAWK TRAIL
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

LAW STUDENT

Employer (See Instructions)

Date

2/12/2005

Full name of contributor

KEVIN BURKE

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5311 WISEBURN STREET
HAWTHORNE, CA 90250

Principal occupation / Job title (See Instructions)

POLICE SARGEANT

Employer (See Instructions)

CITY OF LOS ANGELES

Date

3/2/2005

Full name of contributor

DAVID PENA

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1508 B KAREN AVE
AUSTIN, TX 78757

Principal occupation / Job title (See Instructions)

EXECUTIVE DIRECTOR

Employer (See Instructions)

NATIONAL HISPANIC BUS ASST

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/2/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JULIAN RODRIGUEZ

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

2010 MESQUITE
EDINBURG, TX 78539

9 Principal occupation / Job title (See Instructions)

LAWYER

10 Employer (See Instructions)

SELF EMPLOYED

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JAMES ARMSWORTH

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2001 KIRBY DRIVE
HOUSTON, TX 77019

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

Date

2/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ELSA HERNANDEZ

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5911 BRENDA LANE
SAN ANTONIO, TX 78240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHARLES BARTLETT

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4706 PECAN GROVE
SAN ANTONIO, TX 78222

Principal occupation / Job title (See Instructions)

LANDSCAPE CONTRACTOR

Employer (See Instructions)

Date

2/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PAULA POUTY

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2306 PIPESTONE DR
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/24/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

DELMA OCHOA

6 Contributor address; City; State; Zip Code

102 PARK DR
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)

25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

SOCIAL WORKER

10 Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

S A GORDON

Contributor address; City; State; Zip Code

8826 RIDGE MOUNTAIN
SAN ANTONIO, TX 78250

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SANTA CASTRO

Contributor address; City; State; Zip Code

123 MAIN
SAN ANTONIO, TX 78222

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

SELF EMPLOYED

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CAROL GATES

Contributor address; City; State; Zip Code

354 CUB DRIVE
MARION, TX 78124

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ALDA STINSON

Contributor address; City; State; Zip Code

14618 DAUBER
SAN ANTONIO, TX 78248

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/2/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

DAVID FISHER

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

833 N VISTA
LOS ANGELES, CA 90046

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ELMA ANDRADE

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

10622 LYNX RANGE
SAN ANTONIO, TX 78251

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHRISTINA VASQUEZ

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1525 LEAL ST
SAN ANTONIO, TX 78207

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

Date

3/3/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PATRICIA CASTILLO

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

138 PIEGAN ST
SAN ANTONIO, TX 78207

Principal occupation / Job title (See Instructions)

SOCIAL WORKER

Employer (See Instructions)

Date

2/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ANA MONTOYA

Amount of contribution (\$)

298.46

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5800 BROADWAY , Apt/Suite: 202
SAN ANTONIO, TX 78209

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/27/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

THOMAS DENAPOLI

7 Amount of contribution (\$)

75.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

13234 TRENTWOOD
SAN ANTONIO, TX 78231

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CAROL TROSTLE

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

13043 HUNTERS RIDGE
SAN ANTONIO, TX 78230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DAWN CARMODY

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

314 QUENTIN DR
SAN ANTONIO, TX 78201

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

Date

2/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JESSE HERNANDEZ

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

8715 PERSHIRE
SAN ANTONIO, TX 78254

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/27/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERTO FLORES

Amount of contribution (\$)

37.50

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

16711 SPRINGHILL DRIVE
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/27/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

DANIEL GRANEY

6 Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

7 Amount of
contribution (\$)
37.50

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

2/27/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

FERNANDO BERRIOS

Contributor address; City; State; Zip Code

317 LEXINGTON AVE, Apt/Suite: 347
SAN ANTONIO, TX 78215

Amount of
contribution (\$)
75.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/27/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

RAQUEL CASTILLO

Contributor address; City; State; Zip Code

2918 MICHAEL BRIAN
SAN ANTONIO, TX 78237

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

TEACHER

Employer (See Instructions)

Date

2/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PHILLIP HALL

Contributor address; City; State; Zip Code

136 SHADWELL
SAN ANTONIO, TX 78228

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

PROFESSOR OF SOCIAL WORK

Employer (See Instructions)

Date

2/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GLORIA DAVILA

Contributor address; City; State; Zip Code

6319 STABLE DOWNS
SAN ANTONIO, TX 78249

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/26/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

LIONEL PENA

6 Contributor address; City; State; Zip Code

338 CLUB DRIVE
SAN ANTONIO, TX 78201

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DIANA FOX

Contributor address; City; State; Zip Code

5826 GILLIS
SAN ANTONIO, TX 78240

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DONNA WRIGHT

Contributor address; City; State; Zip Code

8505 WINDY CROSS
SAN ANTONIO, TX 78239

Amount of
contribution (\$)
500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

SELF EMPLOYED

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DEANNA FRISK

Contributor address; City; State; Zip Code

26609 S GLENROSE RD
SAN ANTONIO, TX 78258

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARY L REYNA

Contributor address; City; State; Zip Code

319 SURRELS
SAN ANTONIO, TX 78228

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/25/2005

5 Full name of contributor

SHANNON NISBET

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

231 ROCKHILL
SAN ANTONIO, TX 78209

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/17/2005

Full name of contributor

BERT PFIESTER

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

144 E. FRENCH
SAN ANTONIO, TX 78212

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/2005

Full name of contributor

PHYLISS MASSENGALE

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

227 GLAMIS AVE
SAN ANTONIO, TX 78223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/21/2005

Full name of contributor

JAMES KOCH

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

PO Box 680511
SAN ANTONIO, TX 78268

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/2005

Full name of contributor

LARRY KELLER

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

13818 GRIFFIIN RIDGE
SAN ANTONIO, TX 78247

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/23/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JUDY SAUCEDO

6 Contributor address; City; State; Zip Code

9003 POWHATAN
SAN ANTONIO, TX 78230

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

STUDENT

10 Employer (See Instructions)

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

TIMOTHY DEWEIN

Contributor address; City; State; Zip Code

1102 E. SONTERRA BLVD, Apt/Suite: 106
SAN ANTONIO, TX 78258-8452

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

REALTOR

Employer (See Instructions)

SELF EMPLOYED

Date

3/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOHN FLORES

Contributor address; City; State; Zip Code

11453 SEDGEMOORE DR
JACKSONVILLE, FL 32223

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

REGULATORY ANALYST

Employer (See Instructions)

NGM INS

Date

2/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MONICA CRUZ

Contributor address; City; State; Zip Code

2350 GRAMERCY
SAN ANTONIO, TX 78201

Amount of contribution (\$)

65.00

In-kind contribution description (if applicable)

CATERING

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/13/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

WILL CAGLE

Contributor address; City; State; Zip Code

2303 GRAMERCY
SAN ANTONIO, TX 78201

Amount of contribution (\$)

165.00

In-kind contribution description (if applicable)

CATERING

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/13/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

TERRI DE LOS SANTOS

6 Contributor address; City; State; Zip Code

2350 W GRAMERCY
SAN ANTONIO, TX 78201-

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)
CATERING

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

VERNA PACO

Contributor address; City; State; Zip Code

2539 BENRUS
SAN ANTONIO, TX 78228

Amount of
contribution (\$)
20.00

In-kind contribution
description (if applicable)
CATERING

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DAVID PENA

Contributor address; City; State; Zip Code

14122 CHURCHILL ESTATES
SAN ANTONIO, TX 78248

Amount of
contribution (\$)
120.00

In-kind contribution
description (if applicable)
YARD SIGN STICKS

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SHEILA KORTE

Contributor address; City; State; Zip Code

4718 SHADY BREEZE
SAN ANTONIO, TX 78217

Amount of
contribution (\$)
125.00

In-kind contribution
description (if applicable)
CATERING

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARILYN GRAHAM

Contributor address; City; State; Zip Code

4718 SHADY BREEZE
SAN ANTONIO, TX 78217

Amount of
contribution (\$)
125.00

In-kind contribution
description (if applicable)
CATERING

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/16/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

MARY BRENNAN

6 Contributor address; City; State; Zip Code

127 TEAKWOOD
SAN ANTONIO, TX 78216

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PATRICIA SAUCEDO LOPEZ

Contributor address; City; State; Zip Code

6407 SENECA
SAN ANTONIO, TX 78238

Amount of contribution (\$)

40.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/17/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MICHELLE PETTY

Contributor address; City; State; Zip Code

1370 PENTHEON
SAN ANTONIO, TX 78232

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

ATTORNEY

Employer (See Instructions)

Date

3/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

HORTENCIA CANO

Contributor address; City; State; Zip Code

PO Box 1843
LA FERIA, TX 78559

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BRIANA BROOKS

Contributor address; City; State; Zip Code

9621 WOODLAND HILLS
SAN ANTONIO, TX 78250

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/15/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JEWEL DAY

6 Contributor address; City; State; Zip Code

315 LAKESID BLVD
SUGAR LAND, TX 77478

7 Amount of
contribution (\$)
500.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

DENTIST

10 Employer (See Instructions)

Date

3/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MICHELE GREENMANE

Contributor address; City; State; Zip Code

3103 EISENHOWER, Apt/Suite: K-19
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
35.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/21/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARY N ABBOTT

Contributor address; City; State; Zip Code

337 SEELING BLVD
SAN ANTONIO, TX 78228

Amount of
contribution (\$)
125.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BRIAN GERARD

Contributor address; City; State; Zip Code

6435 CRESTWAY DR, Apt/Suite: 58
SAN ANTONIO, TX 78239

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SUZY GRAY

Contributor address; City; State; Zip Code

151 THORAIN BLVD
SAN ANTONIO, TX 78212

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/18/2005

5 Full name of contributor

DAVID WIES

☐ out-of-state PAC (ID# _____)

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

12726 CRANES MILL
SAN ANTONIO, TX 78230

9 Principal occupation / Job title (See Instructions)

TRAVEL PLANNER

10 Employer (See Instructions)

Date

3/18/2005

Full name of contributor

JACK MONDIN

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

440.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

12726 CRANES MILL
SAN ANTONIO, TX 78230

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/8/2005

Full name of contributor

NINFA CARRILLO

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

20.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

202 E. PARK AVE
SAN ANTONIO, TX 78212

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/17/2005

Full name of contributor

RUTH STEWART

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11318 WOODRIDGE PATH
SAN ANTONIO, TX 78249

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/2005

Full name of contributor

WINFRED PIKELIS

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6020 DANNY KAY, Apt/Suite: 1801
SAN ANTONIO, TX 78240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

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3 ACCOUNT # (Ethics Commission filers)

4 Date

3/12/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

EDWARD A LANE

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

9988 SANDSTONE ROAD
BURTON, TX 77835

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PAT JASSO

Amount of contribution (\$)

35.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

326 ANTON DRIVE
SAN ANTONIO, TX 78223

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JERRY MORRISEY

Amount of contribution (\$)

60.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

19631 ENCINO WAY
SAN ANTONIO, TX 72859

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHARLES BARTLETT

Amount of contribution (\$)

40.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4706 PECAN GROVE DR
SAN ANTONIO, TX 78222

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GRACE DEVERICK

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

5726 PONDEROSA
SAN ANTONIO, TX 78240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/16/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

MARY MORENO

6 Contributor address; City; State; Zip Code

6865 STONYKIRK ST
SAN ANTONIO, TX 78240

7 Amount of
contribution (\$)
25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DEREK BERLIN

Contributor address; City; State; Zip Code

3614 QUIET MEADOW DR
SAN ANTONIO, TX 78247

Amount of
contribution (\$)
130.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/9/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ANNISE PARKER CAMPAIGN

Contributor address; City; State; Zip Code

PO Box 66513
HOUSTON, TX 77266

Amount of
contribution (\$)
250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DALE TREMBLAY

Contributor address; City; State; Zip Code

207 RIDGEMONT AVE
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ELAINE TALARSKI

Contributor address; City; State; Zip Code

7922 QUAIL BREEZE
SAN ANTONIO, TX 78250

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

2/28/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

R TERRY DOLAN

6 Contributor address; City; State; Zip Code

4708 BULL CREEK ROAD
AUSTIN, TX 78731

7 Amount of
contribution (\$)
75.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ALEJO ESCAMILLA

Contributor address; City; State; Zip Code

14103 BURLWOOD
SAN ANTONIO, TX 78249

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)
RETIRED

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LOUIE WEISS

Contributor address; City; State; Zip Code

110 BRIGHTWOOD
SAN ANTONIO, TX 78209-

Amount of
contribution (\$)
75.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

RICH LAHAYE

Contributor address; City; State; Zip Code

16139 OLD STABLE RD
SAN ANTONIO, TX 78247

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/27/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOHN KRIK

Contributor address; City; State; Zip Code

137 GRAND OAK
SAN ANTONIO, TX 78202

Amount of
contribution (\$)
75.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/10/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JEFF HARMON

6 Contributor address; City; State; Zip Code

527 FULTON AVE
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SALVADOR TOVAR

Contributor address; City; State; Zip Code

2302 GRAMERCY
SAN ANTONIO, TX 78201

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)
WEB DESIGNER

Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOEY MARTIN

Contributor address; City; State; Zip Code

2248 GARDEN CT
SAN MARCOS, TX 78666

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

FRED E WILLIAMS

Contributor address; City; State; Zip Code

7600 BROADWAY, Apt/Suite: G6
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERT E BEST

Contributor address; City; State; Zip Code

14610 PARKSITE WOODS
SAN ANTONIO, TX 78249

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/12/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

CLIFTON DOLLAR

6 Contributor address; City; State; Zip Code

2414 LEDGE HOLLOW
SAN ANTONIO, TX 78232

7 Amount of
contribution (\$)

75.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GLENN SMILEY

Contributor address; City; State; Zip Code

281 WEST LOVERA
SAN ANTONIO, TX 78212

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

TRAVIS COX

Contributor address; City; State; Zip Code

8303 GREATVIEW, Apt/Suite: 403
SAN ANTONIO, TX 78230

Amount of
contribution (\$)

37.50

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARILYN GRAHAM

Contributor address; City; State; Zip Code

4718 SHADY BREEZE
SAN ANTONIO, TX 78217

Amount of
contribution (\$)

40.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SHEILA KORTE

Contributor address; City; State; Zip Code

4718 SHADY BREEZE
SAN ANTONIO, TX 78217

Amount of
contribution (\$)

35.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/12/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

GEORGE R PAGE

6 Contributor address; City; State; Zip Code

330 E SUMMIT AVE
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)

75.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/12/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DORA LEE RAMOS

Contributor address; City; State; Zip Code

6701 BLANCO ROAD, Apt/Suite: 413
SAN ANTONIO, TX 78216

Amount of
contribution (\$)

35.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROLAND BENAVIDEZ

Contributor address; City; State; Zip Code

8826 WICKERSHAM ST
SAN ANTONIO, TX 78250

Amount of
contribution (\$)

75.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

HAIR STYLIST

Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOHANNA GUERRERO

Contributor address; City; State; Zip Code

12015 HART PATH
SAN ANTONIO, TX 78249

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

MEDICAL STUDENT

Employer (See Instructions)

Date

3/8/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DENISE BENNETT

Contributor address; City; State; Zip Code

9230 TREE VILLAGE
SAN ANTONIO, TX 78250

Amount of
contribution (\$)

75.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

SELF EMPLOYED

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/7/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

MONICA MATHEWSON

7 Amount of contribution (\$)

15.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

7712 RANGER OAK ST
LIVE OAK, TX 78233

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/9/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ADRIANA DURAN

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

902 HORTENCIA AVE
SAN ANTONIO, TX 78222

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/8/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DEANNA VILLAREAL

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

6802 FARROW
SAN ANTONIO, TX 78240

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/9/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MIKE FARNER

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2402 LEDGE HOLLOW
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GLYNIS CHRISTINE

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

1121 W MLK DRIVE
SAN MARCOS, TX 78666

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/7/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

PAMELA ADAMS

6 Contributor address; City; State; Zip Code

120 MC NEEL RD
SAN ANTONIO, TX 78228

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/8/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHARLES TUCK

Contributor address; City; State; Zip Code

139 WAXWOOD
SAN ANTONIO, TX 78216

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DONALD A EDGCOMB

Contributor address; City; State; Zip Code

9335 AUTUMN STORM
SAN ANTONIO, TX 78254

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ANITA TILLMAN

Contributor address; City; State; Zip Code

4010 SYLVAN OAKS
SAN ANTONIO, TX 78229

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GUADALUPE FLORES

Contributor address; City; State; Zip Code

4815 IRMA
SAN ANTONIO, TX 78237

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/10/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JIMISU STUCKEY

6 Contributor address; City; State; Zip Code

324 MORNINGSIDE DR
SAN ANTONIO, TX 78209

7 Amount of
contribution (\$)

50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BLANCA MARES

Contributor address; City; State; Zip Code

1026 RIPON
SAN ANTONIO, TX 78228

Amount of
contribution (\$)

20.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PATRICIA TARNOWSKI

Contributor address; City; State; Zip Code

1406 SCHLEY
SAN ANTONIO, TX 78210

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LUCINDA COMBS

Contributor address; City; State; Zip Code

122 ARVIN DRIVE
SAN ANTONIO, TX 78209

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOHELLE DEMMER

Contributor address; City; State; Zip Code

5314 HAPPINESS LANE
SAN ANTONIO, TX 78219

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/3/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

GLORIA MARTINEZ

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

8727 JACK BEAN
SAN ANTONIO, TX 78240

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/4/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOYCE RUMMEL

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

20 DONOROE SQ
SAN ANTONIO, TX 78229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SARAH GONZALES

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2910 HILLCREST AVE
HAYWARD, CA 94542

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

NANCY MANGAN

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2526 CHESTNUT BEND
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERTO FLORES

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/6/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

DANIEL GRANEY

6 Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

7 Amount of
contribution (\$)

25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/7/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JANET VASQUEZ

Contributor address; City; State; Zip Code

268 W MARIPOSA
SAN ANTONIO, TX 78212

Amount of
contribution (\$)

10.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CHARLES PRADO

Contributor address; City; State; Zip Code

3626 SAN LUIS
SAN ANTONIO, TX 78207

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

NANCY RUSSELL

Contributor address; City; State; Zip Code

13738 STONEY HILL
SAN ANTONIO, TX 78231

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/6/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CARLOS ORTIZ

Contributor address; City; State; Zip Code

401 HOLLAND, Apt/Suite: 326
SAN ANTONIO, TX 78212

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| | | | |
|---|--|--|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule A: 36 of 51 | |
| 2 FILER NAME ELENA K GUAJARDO | | 3 ACCOUNT # (Ethics Commission filers) | |
| 4 Date 3/6/2005 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) MARY WYNN 6 Contributor address; City; State; Zip Code 2039 W KINGS HWY SAN ANTONIO, TX 78201 | 7 Amount of contribution (\$) 50.00 | 8 In-kind contribution description (if applicable) |
| 9 Principal occupation / Job title (See Instructions) | | 10 Employer (See Instructions) | |
| Date 3/6/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) DENISE Y MEJIA Contributor address; City; State; Zip Code 3554 LE BLANC SAN ANTONIO, TX 78247 | Amount of contribution (\$) 30.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 1/24/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) ROBERT DALUZ Contributor address; City; State; Zip Code 2116 DOVE CREEK SAN ANTONIO, TX 78245 | Amount of contribution (\$) 25.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 1/24/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) JEFFREY JUNG Contributor address; City; State; Zip Code 142 CLAYWELL SAN ANTONIO, TX 78209 | Amount of contribution (\$) 100.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |
| Date 1/23/2005 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) FERNANDO BERRIOS Contributor address; City; State; Zip Code 317 LEXINGTON AVE, Apt/Suite: 347 SAN ANTONIO, TX 78215 | Amount of contribution (\$) 50.00 | In-kind contribution description (if applicable) |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) | |

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/23/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

NEIL LEATHERBURY

6 Contributor address; City; State; Zip Code

1523 CRESCENT VIEW
SAN ANTONIO, TX 78258

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JEANNE BELAIRE

Contributor address; City; State; Zip Code

7302 FOREST STREAM
SAN ANTONIO, TX 78233

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/18/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

REBECCA VELA

Contributor address; City; State; Zip Code

685 E LOOP 1604S, Apt/Suite: 11
ADKINS, TX 78101

Amount of
contribution (\$)
10.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MICHELLE URIARTE

Contributor address; City; State; Zip Code

1919 PREAKNESS LANE
SAN ANTONIO, TX 78248-

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/11/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BETTY BURKE

Contributor address; City; State; Zip Code

4406 PECAN GROVE BLVD
SAN ANTONIO, TX 78222

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/17/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

C DALE MCEOWEN

6 Contributor address; City; State; Zip Code

6336 ANNAPOLIS LANE
DALLAS, TX 75214

7 Amount of
contribution (\$)
25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/1/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

THOMAS DREYER

Contributor address; City; State; Zip Code

102 W CROCKETT , Apt/Suite: 700
SAN ANTONIO, TX 78205

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DONNA CHERYL JOHNSON

Contributor address; City; State; Zip Code

5420 MENARD
GALVESTON, TX 77551

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOANNE WIETERS

Contributor address; City; State; Zip Code

444 EXECUTIVE CENTER DR, Apt/Suite: 230
EL PASO, TX 79902

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/17/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MERRY SALINAS

Contributor address; City; State; Zip Code

26904 AUTUMN GLEN
BOERNE, TX 78006

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

1/21/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

STELLA KYLE

6 Contributor address; City; State; Zip Code

103 LARKWOOD DR
SAN ANTONIO, TX 78209

7 Amount of
contribution (\$)

25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LINDA MOCKERIDGE

Contributor address; City; State; Zip Code

11107 WURZBACK, Apt/Suite: 304
SAN ANTONIO, TX 78230

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

EMILY MILLER

Contributor address; City; State; Zip Code

7801 SHOAL CREEK, Apt/Suite: 142
AUSTIN, TX 78757

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/2/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARK GROBLEWSKI

Contributor address; City; State; Zip Code

1802 OAK LANE CIRCLE
PEARLAND, TX 77581

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/29/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CAROL RODRIGUEZ

Contributor address; City; State; Zip Code

2039 STEVES
SAN ANTONIO, TX 78210

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/20/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

OSCAR GUAJARDO JR

6 Contributor address; City; State; Zip Code

189 NATIONAL BLVD
UNIVERSAL CITY, TX 78148-4444

7 Amount of
contribution (\$)
100.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARILYN GRAHAM

Contributor address; City; State; Zip Code

4718 SHADY BREEZE
SAN ANTONIO, TX 78217

Amount of
contribution (\$)
60.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JACK MONDIN

Contributor address; City; State; Zip Code

12726 CRANES MILL
SAN ANTONIO, TX 78230

Amount of
contribution (\$)
60.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CARLA SALINAS

Contributor address; City; State; Zip Code

321 KAMPMANN AVE
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
60.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

KRIS BIEDENHARN-RESSEL

Contributor address; City; State; Zip Code

2925 HIDDEN ELM
SAN ANTONIO, TX 78261

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

1/20/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERTO FLORES

7 Amount of contribution (\$)

30.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LUCILLE DURAN

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

227 E HAVER AVE
SAN ANTONIO, TX 78214

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

VICKIE LOUTHEN

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

9490 FM 1863
SAN ANTONIO, TX 78266

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DANIEL GRANEY

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232-7442

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JUDITH SAENZ

Amount of contribution (\$)

30.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3554 LE BLANC
SAN ANTONIO, TX 78247

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/20/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

EMILY THUSS

6 Contributor address; City; State; Zip Code

215 E HUISACHE
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)
130.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DENISE Y MEJIA

Contributor address; City; State; Zip Code

3554 LE BLANC
SAN ANTONIO, TX 78247

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LESLEY RUBIN

Contributor address; City; State; Zip Code

21102 SONOMA
SAN ANTONIO, TX 78259

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/20/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JERRY WILSON

Contributor address; City; State; Zip Code

107 TALAVERA PKWY, Apt/Suite: 234
SAN ANTONIO, TX 78232

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

THOMAS KOENIG

Contributor address; City; State; Zip Code

7318 THRUSH GARDEN
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

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2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

1/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

NELL NIXON

6 Contributor address; City; State; Zip Code

5209 MC CULLOUGH
SAN ANTONIO, TX 78212

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

EDWIN JOHNSON

Contributor address; City; State; Zip Code

2414 LEDGE HOLLOW
SAN ANTONIO, TX 78232

Amount of contribution (\$)

60.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/31/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

NORMA ROGERS

Contributor address; City; State; Zip Code

105 HERMINE
SAN ANTONIO, TX 78212

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SHEILA KORTE

Contributor address; City; State; Zip Code

4718 SHADY BREEZE
SAN ANTONIO, TX 78217

Amount of contribution (\$)

60.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

CRISTINA RAMIREZ

Contributor address; City; State; Zip Code

146 TEAKWOOD LANE
SAN ANTONIO, TX 78216

Amount of contribution (\$)

60.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

CHERYL WHITE KURTZ

6 Contributor address; City; State; Zip Code

115 WYNDALE ST
SAN ANTONIO, TX 78209

7 Amount of
contribution (\$)
50.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GEORGE PAGE

Contributor address; City; State; Zip Code

330 E. SUMMIT AVE
SAN ANTONIO, TX 78212

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

RONALD SOELE

Contributor address; City; State; Zip Code

342 W. GRAMERCY
SAN ANTONIO, TX 78212

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARIO LLANO

Contributor address; City; State; Zip Code

334 E ROSEWOOD
SAN ANTONIO, TX 78212

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

SLOAN FOSTER

Contributor address; City; State; Zip Code

453 HARMON
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
49.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

JEFF HARMON

6 Contributor address; City; State; Zip Code

527 FULTON AVE
SAN ANTONIO, TX 78212

7 Amount of
contribution (\$)

40.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

REBEKKAH ZEPEDA

Contributor address; City; State; Zip Code

303 SENOVA DR
SAN ANTONIO, TX 78216

Amount of
contribution (\$)

30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

BRYAN GERARD

Contributor address; City; State; Zip Code

6435 CRESTWAY DR, Apt/Suite: 58
SAN ANTONIO, TX 78239

Amount of
contribution (\$)

30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBBIE J PARMAN

Contributor address; City; State; Zip Code

PO Box 2254
UNIVERSAL CITY, TX 78148

Amount of
contribution (\$)

30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARTHA PRENTISS

Contributor address; City; State; Zip Code

186 THORAIN
SAN ANTONIO, TX 78212

Amount of
contribution (\$)

30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
46 of 51

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

SHARON SCOTT

6 Contributor address; City; State; Zip Code

807 ELIZABETH RD
SAN ANTONIO, TX 78209

7 Amount of
contribution (\$)
30.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

PAT PROWSE

Contributor address; City; State; Zip Code

807 ELIZABETH RD
SAN ANTONIO, TX 78209

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ANN MARIE SCHROEDER

Contributor address; City; State; Zip Code

PO Box 12450
SAN ANTONIO, TX 78212

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROBERTO FLORES

Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

Amount of
contribution (\$)
30.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GRACE ROSALES

Contributor address; City; State; Zip Code

1623 W HUISACHE
SAN ANTONIO, TX 78201

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
47 of 51

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

1/30/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

DANIEL GRANEY

6 Contributor address; City; State; Zip Code

16711 SPRINGHILL DR
SAN ANTONIO, TX 78232

7 Amount of
contribution (\$)
30.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

LAURA HERNANDEZ

Contributor address; City; State; Zip Code

5614 E ROLLING RIDGE DR
SAN ANTONIO, TX 78228

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

HELEN HALLMAN

Contributor address; City; State; Zip Code

4926 SURVEYOR
SAN ANTONIO, TX 78219

Amount of
contribution (\$)
20.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

TINA MORGAN

Contributor address; City; State; Zip Code

11453 SEDGEMOORE DR
JACKSONVILLE, FL 32223

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ROMELIA VALLES

Contributor address; City; State; Zip Code

13923 AMBER CREST
SAN ANTONIO, TX 78249

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:
48 of 51

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/25/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

VICTORIA HANSEN

6 Contributor address; City; State; Zip Code

16102 W DORMAN
AUSTIN, TX 78717

7 Amount of
contribution (\$)
25.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/25/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ALBERT DEL RIO

Contributor address; City; State; Zip Code

4706 PECAN GROVE DR
SAN ANTONIO, TX 78222

Amount of
contribution (\$)
50.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/16/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ARNOLD VANDENBERG

Contributor address; City; State; Zip Code

805 LAS CIMAS PKWY, Apt/Suite: 430
AUSTIN, TX 78746

Amount of
contribution (\$)
100.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JUDITH HALL

Contributor address; City; State; Zip Code

17550 STATE HWY 211
HELOTES, TX 78023

Amount of
contribution (\$)
200.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JANICE YOUNGER

Contributor address; City; State; Zip Code

8217 CLEMSON
TYLER, TX 75703

Amount of
contribution (\$)
25.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/23/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

MICHAEL LAUSELL

6 Contributor address; City; State; Zip Code

5120 COUNTY ROAD 4
BURDETT, NY 14818

7 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation / Job title (See Instructions)

ATTORNEY

10 Employer (See Instructions)

Date

3/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ALAN R BRODIE

Contributor address; City; State; Zip Code

2016 NORTH CLEVELAND AVE
CHICAGO, IL 60614

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

Date

3/23/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

DAVID EVANS

Contributor address; City; State; Zip Code

3549 SOUTH UTAH STREET
ARLINGTON, VA 22206

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

SENIOR POLICY ADVISOR

Employer (See Instructions)

CENTER FOR CIVIC EDUCATION

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JOSEPH MCMAHON

Contributor address; City; State; Zip Code

2031 Q STREET NW
WASHINGTON, DC 20009

Amount of
contribution (\$)

250.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

CONSULTANT

Employer (See Instructions)

MCMAHAN AND ASSOCIATES

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

JAMES O STEPP

Contributor address; City; State; Zip Code

3 SHERIDAN SQUARE, Apt/Suite: 16A
NEW YORK, NY 10014

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation / Job title (See Instructions)

RETIRED

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

50 of 51

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/25/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

OKGA LIZCANO

6 Contributor address; City; State; Zip Code

137 SEELING
SAN ANTONIO, TX 78228

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/28/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

MARGARET VASQUES

Contributor address; City; State; Zip Code

1443 W HOLLYWOOD AVE
SAN ANTONIO, TX 78201

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/24/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ESTHER DIECKMANN

Contributor address; City; State; Zip Code

105 HOSKINS COURT, Apt/Suite: 107
STANFORD, CA 94305

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

MANAGER

Employer (See Instructions)

COUNTY OF SANTA CLARA

Date

3/26/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

ELMA ANDRADE

Contributor address; City; State; Zip Code

10622 LYNX RANGE
SAN ANTONIO, TX 78251

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/22/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

GORGE GUEL

Contributor address; City; State; Zip Code

6203 PECAN VALLEY
SAN ANTONIO, TX 78223

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

DENTIST

Employer (See Instructions)

SELF EMPLOYED

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule A:

51 of 51

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/22/2005

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

CANDANCE MICHAEL

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

PO Box 681472
SAN ANTONIO, TX 78268

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

1/15/2005

Full name of contributor

☐ out-of-state PAC (ID# _____)

WILL CAGLE

Amount of contribution (\$)

160.00

In-kind contribution description (if applicable)

WEBHOSTING

Contributor address; City; State; Zip Code

2303 GRAMERCY
SAN ANTONIO, TX 78201

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.



PLEDGED CONTRIBUTIONS**SCHEDULE B**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule B:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 TOTAL OF UNITEMIZED PLEDGES:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date**6** Full name of pledgor☐ out-of-state PAC (ID#:_____)**8** Amount of
pledge (\$)**9** In-kind description
(if applicable)**7** Pledgor address; City; State; Zip Code**10** Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID#:_____)Amount of
pledge (\$)In-kind description
(if applicable)

Pledgor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.**

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule E:

1 of 1

2 FILER NAME

ELENA K GUAJARDO

3 ACCOUNT # (Ethics Commission filers)**4** TOTAL OF UNITEMIZED LOANS:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$Unitemized

5 Date of loan**7** Name of lender☐ out-of-state PAC (ID#:_____)**9** Loan Amount (\$)**6** Is lender a financial institution?**8** Lender address; City; State; Zip Code**10** Interest rate**11** Maturity date**12** Principal occupation / Job title (See Instructions)**13** Employer (See Instructions)**14** Description of Collateral☐ none**15** GUARANTOR INFORMATION**16** Name of guarantor**18** Amount Guaranteed (\$)☐ not applicable**17** Guarantor address; City; State; Zip Code**19** Principal Occupation**20** Employer

Date of loan

Name of lender

☐ out-of-state PAC (ID#:_____)

Loan Amount (\$)

Is lender a financial institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation

Employer

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If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.



POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

1 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

| | | |
|-------------------------------|--|--------------------------------------|
| 4 Date 1/9/2005 | 5 Payee name SBC 6 Payee address; City; State; Zip Code 4119 BROADWAY SAN ANTONIO, TX 78209 | 7 Amount (\$) 11.78 |
|-------------------------------|--|--------------------------------------|

| | |
|---|--|
| 8 Purpose of payment (See instructions regarding type of information required.) PHONE SERVICE | 9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held |
|---|--|

| | | |
|----------------------|--|-----------------------------|
| Date 2/9/2005 | Payee name SBC Payee address; City; State; Zip Code 4119 BROADWAY SAN ANTONIO, TX 78209 | Amount (\$) 14.45 |
|----------------------|--|-----------------------------|

| | |
|--|---|
| Purpose of payment (See instructions regarding type of information required.) PHONE SERVICE | .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held |
|--|---|

| | | |
|----------------------|--|-----------------------------|
| Date 3/9/2005 | Payee name SBC Payee address; City; State; Zip Code 4119 BROADWAY SAN ANTONIO, TX 78209 | Amount (\$) 14.45 |
|----------------------|--|-----------------------------|

| | |
|--|---|
| Purpose of payment (See instructions regarding type of information required.) PHONE SERVICE | .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held |
|--|---|

| | | |
|----------------------|--|-----------------------------|
| Date 3/6/2005 | Payee name USPS Payee address; City; State; Zip Code 4835 MEDICAL DRIVE SAN ANTONIO, TX 78229 | Amount (\$) 26.64 |
|----------------------|--|-----------------------------|

| | |
|--|---|
| Purpose of payment (See instructions regarding type of information required.) POSTAGE | .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name Office sought Office held |
|--|---|

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

2 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

| | | |
|--------------------------------|---|--------------------------------------|
| 4 Date 1/15/2005 | 5 Payee name USPS 6 Payee address; City; State; Zip Code 4835 MEDICAL DRIVE SAN ANTONIO, TX 78229 | 7 Amount (\$) 34.00 |
|--------------------------------|---|--------------------------------------|

| | |
|--|--|
| 8 Purpose of payment (See instructions regarding type of information required.) STAMPS | 9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|--|--|

| | | |
|-----------------------|---|------------------------------|
| Date 2/28/2005 | Payee name PC MAILING SERVICES Payee address; City; State; Zip Code 10711 HILLPOINT, Apt/Suite: 100 SAN ANTONIO, TX 78217 | Amount (\$) 127.21 |
|-----------------------|---|------------------------------|

| | |
|--|---|
| Purpose of payment (See instructions regarding type of information required.) MAILING MATERIALS | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|--|---|

| | | |
|-----------------------|---|------------------------------|
| Date 3/10/2005 | Payee name PC MAILING SERVICES Payee address; City; State; Zip Code 10711 HILLPOINT, Apt/Suite: 100 SAN ANTONIO, TX 78217 | Amount (\$) 130.26 |
|-----------------------|---|------------------------------|

| | |
|---|---|
| Purpose of payment (See instructions regarding type of information required.) POSTAGE SERVICES | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|---|

| | | |
|-----------------------|---|------------------------------|
| Date 3/14/2005 | Payee name PC MAILING SERVICES Payee address; City; State; Zip Code 10711 HILLPOINT, Apt/Suite: 100 SAN ANTONIO, TX 78217 | Amount (\$) 130.26 |
|-----------------------|---|------------------------------|

| | |
|--|---|
| Purpose of payment (See instructions regarding type of information required.) PRINTING/MAILINGS | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|--|---|

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

3 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

1/31/2005

5 Payee name

PC MAILING SERVICES

6 Payee address; City; State; Zip Code10711 HILLPOINT, Apt/Suite: 100
SAN ANTONIO, TX 78217**7**

Amount

(\$188.12)

8 Purpose of payment (See instructions regarding type of information required.)

MAILING MATERIALS

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

1/10/2005

Payee name

BOBS PRINTING

Payee address; City; State; Zip Code

1626 FREDERICKSBURG RD
SAN ANTONIO, TX 78201

Amount

(\$49.57)

Purpose of payment (See instructions regarding type of information required.)

PRINTING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

2/28/2005

Payee name

BOBS PRINTING

Payee address; City; State; Zip Code

1626 FREDERICKSBURG RD
SAN ANTONIO, TX 78201

Amount

(\$350.19)

Purpose of payment (See instructions regarding type of information required.)

PRINTING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

2/1/2005

Payee name

BOBS PRINTING

Payee address; City; State; Zip Code

1626 FREDERICKSBURG RD
SAN ANTONIO, TX 78201

Amount

(\$790.51)

Purpose of payment (See instructions regarding type of information required.)

PRINTING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

4 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date**5** Payee name**7** Amount(\$)**1083.41**

2/10/2005

BOBS PRINTING

6 Payee address; City; State; Zip Code1626 FREDERICKSBURG RD
SAN ANTONIO, TX 78201**8** Purpose of payment (See instructions regarding type of information required.)

PRINTING

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)**1787.79**

1/24/2005

BOBS PRINTING

Payee address; City; State; Zip Code

1626 FREDERICKSBURG RD
SAN ANTONIO, TX 78201

Purpose of payment (See instructions regarding type of information required.)

PRINTING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)**3000.00**

1/30/2005

JOHN PUDER

Payee address; City; State; Zip Code

11955 PARLIAMENT, Apt/Suite: 801
SAN ANTONIO, TX 78229-

Purpose of payment (See instructions regarding type of information required.)

CONSULTING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)**3000.00**

2/28/2005

JOHN PUDER

Payee address; City; State; Zip Code

11955 PARLIAMENT, Apt/Suite: 801
SAN ANTONIO, TX 78229-

Purpose of payment (See instructions regarding type of information required.)

CONSULTING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

5 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/1/2005

5 Payee name

IDEALS UNLIMITED

6 Payee address; City; State; Zip Code5213 BANDERA RD
SAN ANTONIO, TX 78238**7** Amount

(\$906.13)

8 Purpose of payment (See instructions regarding type of information required.)

YARD SIGNS

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/15/2005

Payee name

USPS

Payee address; City; State; Zip Code

5837 DE ZAVALA
SAN ANTONIO, TX 78249

Amount

(\$26.64)

Purpose of payment (See instructions regarding type of information required.)

POSTAGE

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/12/2005

Payee name

PATRY CITY

Payee address; City; State; Zip Code

4923 NW LOOP 410
SAN ANTONIO, TX 78229

Amount

(\$26.93)

Purpose of payment (See instructions regarding type of information required.)

FUNDRAISER SUPPLIES

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

2/25/2005

Payee name

KINKOS

Payee address; City; State; Zip Code

4418 BROADWAY
SAN ANTONIO, TX 78209

Amount

(\$6.48)

Purpose of payment (See instructions regarding type of information required.)

COPIES

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

6 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

2/20/2005

5 Payee name

KINKOS

7 Amount(\$)**8.96****6** Payee address; City; State; Zip Code4418 BROADWAY
SAN ANTONIO, TX 78209**8** Purpose of payment (See instructions regarding type of information required.)

COPIES

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/24/2005

Payee name

ROLLING RIDGE VILLAGE

Amount

(\$)**20.00**

Payee address; City; State; Zip Code

123 MAIN
SAN ANTONIO, TX 78201

Purpose of payment (See instructions regarding type of information required.)

INSERT FLYER

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

2/26/2005

Payee name

UPS STORE

Amount

(\$)**9.23**

Payee address; City; State; Zip Code

4319 MEDICAL DRIVE
SAN ANTONIO, TX 78229

Purpose of payment (See instructions regarding type of information required.)

COPIES

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

Date

1/3/2005

Payee name

DIALOGUE

Amount

(\$)**375.00**

Payee address; City; State; Zip Code

626 MISSION ST
SAN ANTONIO, TX 78210

Purpose of payment (See instructions regarding type of information required.)

CONSULTING

**** Complete if direct expenditure to benefit C/OH ****

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

7 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

| | | |
|--------------------------------|---|---------------------------------------|
| 4 Date 2/10/2005 | 5 Payee name DIALOGUE 6 Payee address; City; State; Zip Code 626 MISSION ST SAN ANTONIO, TX 78210 | 7 Amount (\$) 375.00 |
|--------------------------------|---|---------------------------------------|

| | |
|--|--|
| 8 Purpose of payment (See instructions regarding type of information required.) CONSULTING | 9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|--|--|

| | | |
|----------------------|---|------------------------------|
| Date 3/9/2005 | Payee name DIALOGUE Payee address; City; State; Zip Code 626 MISSION ST SAN ANTONIO, TX 78210 | Amount (\$) 375.00 |
|----------------------|---|------------------------------|

| | |
|---|---|
| Purpose of payment (See instructions regarding type of information required.) CONSULTING | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|---|

| | | |
|-----------------------|---|------------------------------|
| Date 2/28/2005 | Payee name DAVID FISHER Payee address; City; State; Zip Code 10631 NACODOCHES SAN ANTONIO, TX 78216 | Amount (\$) 344.29 |
|-----------------------|---|------------------------------|

| | |
|---|---|
| Purpose of payment (See instructions regarding type of information required.) REIMBURSEMENT FOR SUPPLIES | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|---|

| | | |
|-----------------------|---|-------------------------------|
| Date 2/28/2005 | Payee name DAVID FISHER Payee address; City; State; Zip Code 10631 NACODOCHES SAN ANTONIO, TX 78216 | Amount (\$) 1400.00 |
|-----------------------|---|-------------------------------|

| | |
|---|---|
| Purpose of payment (See instructions regarding type of information required.) CONSULTING | ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held |
|---|---|

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

8 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/20/2005

5 Payee name

RESOLUTION DESIGN

6 Payee address; City; State; Zip Code711 RIDGEWOOD
SAN ANTONIO, TX 78212-**7**Amount
(\$)**50.00****8** Purpose of payment (See instructions regarding type of information required.)

ARTWORK

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

1/31/2005

Payee name

RESOLUTION DESIGN

Payee address; City; State; Zip Code

711 RIDGEWOOD
SAN ANTONIO, TX 78212-Amount
(\$)**300.00**

Purpose of payment (See instructions regarding type of information required.)

ARTWORK

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

1/31/2005

Payee name

WSI WEBADILLO

Payee address; City; State; Zip Code

11765 WEST AVE
SAN ANTONIO, TX 78216Amount
(\$)**210.00**

Purpose of payment (See instructions regarding type of information required.)

WEBSITE

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/21/2005

Payee name

WOMANSPACE

Payee address; City; State; Zip Code

PO Box 12327
SAN ANTONIO, TX 78212-Amount
(\$)**50.00**

Purpose of payment (See instructions regarding type of information required.)

POLITICAL AD

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

9 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/13/2005

5 Payee name

VICTORY FUND

6 Payee address; City; State; Zip Code1705 DE SALES ST NW
WASHINGTON, DC 20036**7** Amount

(\$120.00)

8 Purpose of payment (See instructions regarding type of information required.)

BRUNCH

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/13/2005

Payee name

HILLCREST CHEVRON

Payee address; City; State; Zip Code

2730 HILLCREST DR
SAN ANTONIO, TX 78216

Amount

(\$18.95)

Purpose of payment (See instructions regarding type of information required.)

GAS FOR POLITICAL EVENT

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/24/2005

Payee name

TAQUERIA JALISCO

Payee address; City; State; Zip Code

6003 BANDERA
SAN ANTONIO, TX 78228

Amount

(\$8.61)

Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/23/2005

Payee name

BLANCO MEXICAN RESTAURANT

Payee address; City; State; Zip Code

1622 FREDERICKSBURG
SAN ANTONIO, TX 78201

Amount

(\$11.69)

Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

10 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

3/17/2005

5 Payee name

BLANCO CAFE

6 Payee address; City; State; Zip Code1720 BLANCO RD
SAN ANTONIO, TX 78212**7** Amount(\$)**8.60****8** Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/8/2005

Payee name

RITAS FIESTA

Payee address; City; State; Zip Code

612 BANDERA RD
SAN ANTONIO, TX 78228

Amount

(\$)**12.69**

Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/3/2005

Payee name

LEES GARDEN

Payee address; City; State; Zip Code

7271 WURZBACH RD, Apt/Suite: 100
SAN ANTONIO, TX 78240

Amount

(\$)**9.50**

Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/12/2005

Payee name

MARIOS MEXICAN RESTAURANT

Payee address; City; State; Zip Code

4841 FREDERICKSBURG
SAN ANTONIO, TX 78229

Amount

(\$)**8.19**

Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

11 of 11

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date

2/23/2005

5 Payee name

JIMS RESTAURANT

7 Amount

(\$15.88)

6 Payee address; City; State; Zip Code5917 BANDERA ROAD
SAN ANTONIO, TX 78238**8** Purpose of payment (See instructions regarding type of information required.)

LUNCH MEETING

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

3/28/2005

Payee name

PAYPAL

Amount

(\$12.26)

Payee address; City; State; Zip Code

2211 N FIRST STREET
SAN JOSE, CA 95131

Purpose of payment (See instructions regarding type of information required.)

USER FEES

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount

(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED



**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G**

| | | |
|---|--|---|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule G: 1 of 1 |
| 2 FILER NAME ELENA K GUAJARDO | | 3 ACCOUNT # (Ethics Commission filers) |

| | |
|---------------|---|
| 4 Date | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 5 Payee name </div> <div style="width: 45%;"> 8 Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 6 Payee address; City; State; Zip Code </div> <div style="width: 45%;"> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 7 Purpose of expenditure (See instructions regarding type of information required.) </div> <div style="width: 45%;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> </div> |
| Date | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Purpose of expenditure (See instructions regarding type of information required.) </div> <div style="width: 45%;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> </div> |
| Date | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Purpose of expenditure (See instructions regarding type of information required.) </div> <div style="width: 45%;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> </div> |
| Date | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Purpose of expenditure (See instructions regarding type of information required.) </div> <div style="width: 45%;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> </div> |
| Date | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee name </div> <div style="width: 45%;"> Amount (\$) </div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Payee address; City; State; Zip Code </div> <div style="width: 45%;"> </div> </div> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> Purpose of expenditure (See instructions regarding type of information required.) </div> <div style="width: 45%;"> <input type="checkbox"/> Reimbursement from political contributions intended </div> </div> |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**PAYMENT FROM POLITICAL CONTRIBUTIONS
TO A BUSINESS OF C/OH****SCHEDULE H**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule H:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

4 Date**5** Business name**7** Amount
(\$).....
6 Business address; City; State; Zip Code**8** Purpose of payment (See instructions regarding type of information required.)**9** ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Business name

Amount
(\$).....
Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Business name

Amount
(\$).....
Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Business name

Amount
(\$).....
Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**NON-POLITICAL EXPENDITURES
MADE FROM POLITICAL CONTRIBUTIONS****SCHEDULE I**

| | | |
|---|---|--|
| The INSTRUCTION GUIDE explains how to complete this form. | | 1 Total pages Schedule I: 1 of 1 |
| 2 FILER NAME ELENA K GUAJARDO | | 3 ACCOUNT # (Ethics Commission filers) |
| 4 Date | 5 Payee name 6 Payee address; City; State; Zip Code 7 Purpose of expenditure (See instructions regarding type of information required.) | 8 Amount (\$) |
| Date | Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) | Amount (\$) |
| Date | Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) | Amount (\$) |
| Date | Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) | Amount (\$) |
| Date | Payee name Payee address; City; State; Zip Code Purpose of expenditure (See instructions regarding type of information required.) | Amount (\$) |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME**3** ACCOUNT # (Ethics Commission filers)

ELENA K GUAJARDO

| | | |
|---------------|---|----------------------|
| 4 Date | 5 Payor name | 8 Amount (\$) |
| | 6 Payor address; City; State; Zip Code | |
| | 7 Reason for credit | |

| | | |
|------|--|-------------|
| Date | Payor name | Amount (\$) |
| | Payor address; City; State; Zip Code | |
| | Reason for credit | |

| | | |
|------|--|-------------|
| Date | Payor name | Amount (\$) |
| | Payor address; City; State; Zip Code | |
| | Reason for credit | |

| | | |
|------|--|-------------|
| Date | Payor name | Amount (\$) |
| | Payor address; City; State; Zip Code | |
| | Reason for credit | |

| | | |
|------|--|-------------|
| Date | Payor name | Amount (\$) |
| | Payor address; City; State; Zip Code | |
| | Reason for credit | |

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.

**** Complete only if "Report Type" on page 1 is marked "Final Report" ******1 C/OH NAME**

ELENA K GUAJARDO

2 ACCOUNT # (Ethics Commission filers)**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER****** Complete A & B below *only* if you are not an officeholder. ******A. CAMPAIGN FUNDS**

Check only one:

☐

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

☐

I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

☐

I do not retain assets purchased with political contributions or interest or other income from political contributions.

☐

I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate**5 OFFICEHOLDER****** Complete this section *only* if you are an officeholder ****☐

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder